

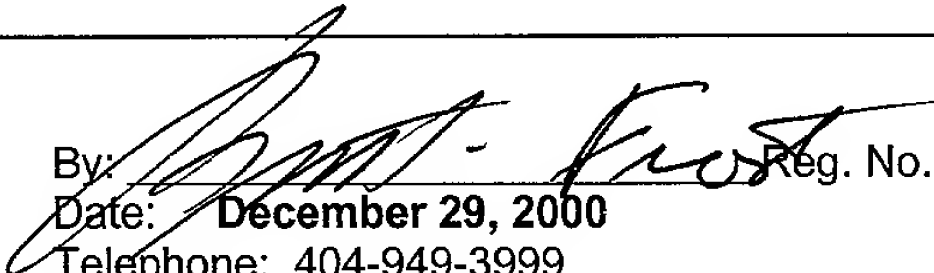
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UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>	<i>Title of Invention</i>	TEXTILE ADHESIVE TAPE
	<i>Named Inventor(s)</i>	Christoph Lodde 448/5
	<i>Attorney Docket</i>	45455/250299
	<i>Express Mail Label No.</i>	EL561430719US

APPLICATION ELEMENTS	Assistant Commissioner for Patents ADDRESS TO: Box Patent Application Washington, D.C. 20231
	ACCOMPANYING APPLICATION PARTS
1. <input checked="" type="checkbox"/> Fee Transmittal Form <small>(Submit an original, and a duplicate for fee processing)</small> 2. <input checked="" type="checkbox"/> Applicant claims Small Entity status 3. <input checked="" type="checkbox"/> Specification, Claims, and Abstract Total Pages 5 4. <input checked="" type="checkbox"/> Drawings Total Sheets 1 5. Oath or Declaration Total Pages a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from prior application (37 CFR 1.63(d)) <small>(for continuation/divisional with Box 16 completed)</small> The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 5b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein. (i) <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. <input type="checkbox"/> Microfiche Computer Program (Appendix)	7. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies 8. <input type="checkbox"/> Assignment: a. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) b. <input type="checkbox"/> Assignment is of record in parent application No. _____ 9. <input type="checkbox"/> 37 CFR 3.73(b) Statement <small>(when there is an assignee)</small> <input type="checkbox"/> Power of Attorney by assignee 10. <input type="checkbox"/> English Translation Document (if applicable) 11. <input type="checkbox"/> Information Disclosure Statement (IDS) PTO- 1449 <input type="checkbox"/> Copies of IDS Citations 12. <input checked="" type="checkbox"/> Preliminary Amendment 13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small> 14. <input type="checkbox"/> Certified Copy of Priority Document(s) 15. <input type="checkbox"/> Other: _____
16. If a CONTINUING APPLICATION , check appropriate box and supply the requisite information: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No: _____ Recite complete dependency back to first parent application: _____	
17. CORRESPONDENCE ADDRESS: <div style="display: flex; justify-content: space-between;"> <div> Roger T. Frost KILPATRICK STOCKTON LLP 2400 Monarch Tower 3424 Peachtree Road, N.E. Atlanta, Georgia 30326 </div> <div> By:  Date: December 29, 2000 Telephone: 404-949-3999 Facsimile: 404-949-2499 </div> </div>	

FEE TRANSMITTALAttorney Docket No. ⁴⁴⁸¹⁵~~45455~~/250299
(26010)

This sheet accompanies a patent application transmittal for the following application:

Inventor(s): **CHRISTOPH LODDE**
Filing Date: **CONCURRENTLY HEREWITH**
Title: **TEXTILE ADHESIVE TAPE**

The filing fee is calculated as shown below:

1. **FILING FEE:**

FOR:	SMALL ENTITY		LARGE ENTITY	
	FEE	FEE PAID	FEE	FEE PAID
<input checked="" type="checkbox"/> UTILITY FILING FEE	\$355	\$355	\$710	
<input type="checkbox"/> DESIGN FILING FEE	\$160		\$320	
<input type="checkbox"/> PLANT FILING FEE	\$245		\$490	
<input type="checkbox"/> REISSUE FILING FEE	\$355		\$710	
<input type="checkbox"/> PROVISIONAL FILING FEE	\$75		\$150	
SUBTOTAL (1)		\$355		\$xxx

2. **CLAIMS:**

SMALL ENTITY				LARGE ENTITY	
FOR:	NO. FILED	NO. EXTRA	RATE	FEE	RATE
TOTAL CLAIMS	11- 20 =	0	x 9 =	0	x 18 =
INDEP. CLAIMS	1 - 3 =	0	x 40 =	0	x 80 =
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIM PRESENTED			+135 =		+270 =
SUBTOTAL (2)				\$0	\$xxx

3. **ADDITIONAL FEES:**

SMALL ENTITY			LARGE ENTITY	
FOR:	FEE	FEE PAID	FEE	FEE PAID
<input checked="" type="checkbox"/> LATE FILING, FEE OR OATH	\$65	\$65	\$130	
<input type="checkbox"/> NON-ENGLISH SPECIFICATION	\$130		\$130	
<input type="checkbox"/> OTHER				
SUBTOTAL (3)			\$65	\$xxx

TOTAL FILING FEES: \$420A check is enclosed for the total amount: **\$420**☐ Charge any additional fees required under 37 C.F.R. 1.16 or 1.17 to Deposit Account 11-0855.KILPATRICK STOCKTON LLP
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3424 Peachtree Road, N.E.
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Telephone: 404-949-3999By: Roger T. Frost, Attorney for Applicant
Reg. No. 22,176

Date: December 29, 2000

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